## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	correspondence including ed below or directed other tions	g the Patent, advance or terwise in Block 1, by (a	rders and notification of r a) specifying a new corres	maintenance fees was spondence address;	ill be r and/or	nailed to the current (b) indicating a sepa	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDI	Feet pape	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
24737	7590 05/10	/2010	nave			· ·	nicai an
P.O. BOX 3001	ELLECTUAL PRO IANOR, NY 10510	OPERTY & STAN	DARDS I he Stat addu tran	reby certify that thi es Postal Service w ressed to the Mail smitted to the USPT	Fee(s ith suff Stop I O (571	of Mailing or Transi ) Transmittal is being icient postage for firs SSUE FEE address ) 273-2885, on the da	nission  deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.
							(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/527,776	10/527,776 03/14/2005		Ercan Ferit Gigi			NL 020859 1796	
FITLE OF INVENTION	: METHOD OF SYNTH	ESIZING OF AN UNVO	DICED SPEECH SIGNAL				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	08/10/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]			
CHAWAN, VIJAY B		2626	704-214000	_			
1. Change of corresponde	ence address or indication	n of "Fee Address" (37	2. For printing on the p	patent front page, list	t		
CFR 1.363).  Change of correspondence of corresp	ondence address (or Cha	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-0 Number is required.	92 or more recent) attach	2 registered attorneys or agents aft names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or type	pe)			
PLEASE NOTE: Unl recordation as set forth	ess an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee detion of this form is NO	data will appear on the p $\Gamma$ a substitute for filing an	atent. If an assigne assignment.	e is id	entified below, the do	ocument has been filed for
(A) NAME OF ASSIG	GNEE		(B) RESIDENCE: (CITY	and STATE OR C	OUNT	RY)	
Koninklijke Philips Electronics N.V. Eindhoven, The Netherlands							
Please check the appropri	iate assignee category or	categories (will not be pr	inted on the patent): $\Box$	Individual 🛚 Co	rporatio	on or other private gro	up entity 🗖 Government
4a. The following fee(s) a	are submitted:		o. Payment of Fee(s): ( <b>Ple</b> a	ase first reapply an	v previ	ously paid issue fee s	shown above)
Issue Fee			A check is enclosed.			• •	,
Publication Fee (N	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - #	# of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number $14-1270$ (enclose an extra copy of this form).					
5. Change in Entity Stat	<b>tus</b> (from status indicated s SMALL ENTITY statu	· · · · · · · · · · · · · · · · · · ·	☐ b. Applicant is no lon	ger claiming SMAL	L ENT	ITY status. See 37 CF	FR 1.27(g)(2).
NOTE: The Issue Fee and	d Publication Fee (if requestreets of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than t	he applicant; a regis	tered a	ttorney or agent; or th	e assignee or other party in
interest as shown by the I	records of the Office Sta	tes i dent and Trademark	onice.				
Authorized Signature	/Michael F	I. Belk/		Date <u>Aug</u>	ust	10, 2010	
Typed or printed name	eMichael B	E. Belk		Registration No	o. <u>3</u>	3 <b>,</b> 357	
an application. Confident submitting the completed	tiality is governed by 35 I application form to the	U.S.C. 122 and 37 CFR USPTO. Time will vary	1.14. This collection is est depending upon the indiv	timated to take 12 m idual case. Any coi	ninutes mments	to complete, including on the amount of time	by the USPTO to process) g gathering, preparing, and ne you require to complete urtment of Commerce, P.O.
Box 1450. Alexandria. V	irginia 22313-1450. DC	NOT SEND FEES OR (	COMPLETED FORMS TO	O THIS ADDRESS	SEND	TO: Commissioner f	rtment of Commerce, P.O. For Patents, P.O. Box 1450,

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.